

		<b>BARRINGTON POLICE DEPARTMENT VACATION WATCH AND INSPECTION FORM</b>		# _____
Name:		Address:		Phone:
Departure Date:		Return Date:		
In case of emergency, do you wish to be notified by collect call? ____ If yes, where? Phone: _____				
Name: _____		Address: _____		
Keyholder:		Address:		Phone:
Type of building: Brick: _____ Frame: _____ Other: _____	Color: _____	Bi-level _____ Ranch _____ 2-story _____	Location on block: _____ _____	
Light's on? _____ Timers? _____ Locations/Times: _____				
Burglar Alarm?	Fire Alarm?	Company _____	Have deliveries been cancelled?	
Work being done while gone? By whom?		Residential Search Waiver		
Cars in drive?			Number of cars in garage:	
Additional information:  ***Safety hazards such as snow or ice prohibit proper inspection of the home***				

### Instructions:

1. Print the form on your printer.
2. Fill in the form completely except the box on the top marked “#”
3. Drop the completed form off at the front desk of the Barrington Public Safety Building at 400 N. Northwest Highway prior to leaving on your vacation.
4. Enjoy your time away.
5. Notify the Police Department upon your return at 847-304-3300.

Please read this form carefully and be aware that by requesting vacation watch service, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages, or loss which you might sustain as a result of your request for vacation watch services from the Barrington Police Department for the subject premises.

**Waiver and Release of All Claims:** On behalf of myself individually, my/our family, and/or my/our respective heirs, successors, and assigns (hereinafter, “I/we”, “my/our”, or “me/us”), I/we: (1) recognize and acknowledge that the Barrington Police Department, the Village of Barrington, including their respective officers, employees, agents, and volunteers (“releasees”) cannot and do not guarantee the security of the subject premises, (2) voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity that I/we may sustain as a result of such vacation watch services (hereinafter “such services”) and/or my/our request for such services relative to the subject premises, (3) agree to waive and relinquish all claims I/we may have (or which may accrue to me/us) against the releasees as a result of such services and/or my/our request for such services from the Barrington Police Department, (4) do hereby fully release and forever discharge all of said releasees from any and all claims for injuries, damages, or loss that I/we may sustain or which may accrue to me/us arising out of, connected with, or in any way associated with such services and/or my/our request for such services.

I have read and fully understand the above important information, assumption of risk and waiver and release of all claims. If making this request via fax, I understand and agree that my/our facsimile signature(s) shall substitute for and have the same legal effect as my/our signature(s) on an original form.

This form must be completed in full and it must be signed by the requestor(s) and dated.